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# Tadcaster Rural District Council

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# REPORT

## ON THE HEALTH OF THE DISTRICT DURING YEAR 1954

by

RONALD G. SMITHSON

Medical Officer of Health

and

ERNEST WITHEFORD

Chief Sanitary Inspector •



# Tadcaster Rural District Council

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# TADCASTER RURAL DISTRICT COUNCIL

## CHAIRMAN:

W. J. SIMPSON, ESQ., M.C., J.P., The Firs, Bishopthorpe.

## VICE-CHAIRMAN:

W. PARSONS, ESQ., 17, Westfield Terrace, Tadcaster.

## PUBLIC HEALTH COMMITTEE:

Chairman: L. WHEELER, ESQ.

Vice-Chairman: MISS E. D. FAWCETT.

Councillor C. Banks.	Councillor H. Mills.
“ H. A. Batty.	“ Mrs. D. E. O'Callaghan.
“ C. Boddy.	“ W. Parsons.
“ N. L. Bramley.	“ G. S. Pullan.
“ T. S. Clayton.	“ Mrs. L. Scott.
“ J. C. Cowling.	“ W. J. Simpson, M.C., J.P.
“ W. Gill.	“ G. R. H. Smith.
“ S. Goodall.	“ P. C. Thompson.
“ G. W. Hardeastle.	“ J. T. Whitehead.
“ A. Haywood.	“ Miss V. Young.

## DIVISIONAL HEALTH ORGANISATION

Medical Officer of Health:

Divisional Medical Officer and Divisional School Medical Officer:

RONALD G. SMITHSON, M.D., Ch.B. (Hons.), D.P.H.

Assistant County Medical Officer:

J. A. G. GRAHAM, M.B., Ch.B.

Part-time Medical Officers at Clinics:

C. E. ASTON, M.B., B.S., M.R.C.S., L.R.C.P.

H. B. COOK, M.D., M.B., Ch.B.

R. P. LAWSON, M.C., M.B., B.S., M.R.C.S., L.R.C.P.

A. MACFARLANE, M.B., Ch.B., D.R.C.O.G., D.C.H., D.P.H.

C. E. MATHIESON, M.B., Ch.B.

W. MURPHY, M.B., Ch.B., M.R.C.S., L.R.C.P.

J. PHILLIPS, M.D., M.B., Ch.B.

## CONSULTANTS AND SPECIALISTS WORKING IN DIVISION:

Ear, Nose and Throat:

R. THOMAS, B.A., B.M., B.Ch. (Oxon), D.L.O.

Eye:

L. WITTELS, M.D., D.O. (Oxon).

Orthopaedic:

M. B. TAYLOR, M.B., Ch.B.

Paediatric:

L. J. PROSSER, M.B., Ch.B., D.C.H.

Tuberculosis:

W. S. GILMOUR, O.B.E., M.B., Ch.B.

V. RYAN, M.D., D.P.H.

S. P. WILSON, M.D., D.P.H.

Dental Officers:

Miss R. SCLARE, L.D.S. (Orthodontic Specialist).

G. O. WOOD, L.D.S.

D. B. OWEN, L.D.S.

Speech Therapist:

Miss M. P. DUNKLEY, L.C.S.T.

## **NURSING STAFF:**

### **Health Visitors/School Nurses:**

Mrs. M. Atkinson, S.R.N., S.C.M., H.V.Cert., D.N.  
Miss G. E. Brigham, S.R.N., S.C.M., H.V.Cert.  
Miss I. V. Brigham, S.R.N., S.C.M., H.V.Cert. (Queen's).  
Miss J. W. Brigham, S.R.N., S.C.M., V.V.Cert.  
Mrs. E. Marsden, S.R.N., S.C.M., H.V.Cert.  
Miss M. B. Pepper, S.R.N., S.C.M., H.V.Cert., D.N.  
Miss C. Swift, S.R.N., S.C.M., H.V. Cert.

### **Home Nurses/Midwives:**

Miss E. E. Basher, S.R.N., C.M.B. (Queen's).  
Miss V. E. M. Finbow, S.R.N., C.M.B. (Queen's).  
Miss C. A. Fox, S.R.N., S.C.M. (Queen's).  
Miss A. Girdlestone, S.E.A.N., C.M.B.  
Miss H. M. Glennie, S.R.N., C.M.B.  
Miss A. E. Hickes, S.E.A.N., C.M.B.  
Miss E. C. Hodgson, S.R.N., C.M.B. (Queen's).  
Miss E. Ingleby, S.R.N., C.M.B. (Queen's).  
Mrs. G. Jeffries, S.E.A.N., C.M.B.  
Mrs. E. Linley, S.E.A.N., C.M.B. (Resigned 31st October, 1954).  
Mrs. A. M. Linins, S.R.N., S.C.M. (Queen's).  
Miss M. Murphy, S.E.A.N., C.M.B.  
Miss W. E. Payne, S.E.A.N., C.M.B.  
Miss M. E. Watson, S.R.N., C.M.B.

### **Home Nurse:**

Miss L. Evamy, S.R.N., C.M.B. (Queen's) (Resigned 30th June, 1954).

### **Dental Attendants:**

Miss Ullathorne.  
Miss Dawson.

### **Physiotherapist:**

Vacant.

### **Assistant Health Visitor/School Nurse:**

Mrs. E. Clark, S.R.N.

### **Tuberculosis Visitor:**

Mrs. E. M. Askam, S.R.N., C.M.B., H.V.Cert. (Queen's).

### **V.D. Social Worker:**

Mrs. Doidge-Harrison.

### **Mental Health:**

Miss C. M. Glover (Social Worker).  
Miss C. M. Leng (Home Teacher) (Resigned 18th August, 1954).

## **CLERICAL STAFF:**

Senior Clerk: F. H. Atack.  
Miss S. Graham.  
Mrs. K. Head (Commenced 24th May, 1954).  
Miss J. M. Lawn.  
Mrs. E. M. Naylor (Commenced 28th June, 1954).  
Mrs. D. M. A. Stephenson (Resigned 8th May, 1954).  
Mrs. E. E. Westerman (Commenced 4th January, 1954).

## **AMBULANCE SERVICE:**

Depot Officer: T. G. Woodhouse.

## PERSONNEL DETAILS

### CHIEF SANITARY INSPECTOR'S OFFICE

#### Chief Sanitary Inspector and Cleansing Superintendent:

ERNEST WITHEFORD, R.S.I. and S.I. Exam. Joint Board.  
R.S.I. Meat and Food Inspector's Cert.

PETER FORBES, R.S.I. and S.I. Exam. Joint Board.  
R.S.I. Meat and Food Inspector's Cert.  
(Resigned 31/12/54).

GEORGE ROEBUCK, R.S.I. and S.I. Exam. Joint Board.  
R.S.I. Meat and Food Inspector's Cert.  
Testamur of the Institute of Public Cleansing.  
R.S.I. Smoke Inspector's Cert.

IAN METCALFE, Junior Assistant and Clerk.

DAVID G. DAY, Junior Assistant and Clerk (in H.M. Forces).

Wetherby House,  
WETHERBY.

August, 1955.

To the Chairman and Members of the  
Tadcaster Rural District Council.

Mr. Chairman, Ladies and Gentlemen,

I regret to say the Vital Statistics for 1954 cannot be regarded with satisfaction. The Birth Rate is below that of comparable parts of the West Riding and of the country as a whole. The Infant Mortality Rate has once again risen; the stillbirth rate is higher than it should be, and a similar remark applies to the illegitimate birth rate. Deaths from Pulmonary Tuberculosis were the same as last year and the death rate compares favourably with other districts.

It is with regret one has to report that two mothers in the district died in consequence of childbirth.

The Council has found itself impeded in its desire to improve facilities for sewage and sewerage disposal and for implementing the water supply to part of the district as a result of limitation on capital expenditure. Whether Tadcaster is getting its fair share of the limited money available is somewhat open to doubt.

The return of Slaughtering to Private Enterprise was facilitated by the Council in such a way as to make the change over almost uneventful. The impression one got as a result of visiting each Slaughter House in the district was that butchers were in two minds as to whether to start slaughtering for themselves again or whether to purchase supplies through the Wholesaler. To what extent this indecision was due to lack of skilled slaughtermen after 15 years of restriction is a matter of conjecture.

It gives me very great pleasure to thank Mr. Chairman, the Chairmen of the Council's Committees and Members of the Council for encouragement and good will throughout the year, and I am sure you will be glad to know that my Staff and I invariably receive every assistance from the other Chief Officers and Staffs of your several Departments.

I, personally, am much indebted for the assistance I receive from the Staff of the Divisional Health Department invariably.

I am, Mr. Chairman,  
Your Obedient Servant,  
RONALD G. SMITHSON,  
Medical Officer of Health.

# PART I. REPORT AS MEDICAL OFFICER OF HEALTH

## 1. GENERAL STATISTICS

Area in Acres	...	...	...	...	...	...	...	...	...	...	...	...	75,754
Population, 1951 Census	...	...	...	...	...	...	...	...	...	...	...	...	26,951
Population, Registrar-General's Estimate Mid-1954	...	...	...	...	...	...	...	...	...	...	...	...	27,680
Number of Inhabited Houses	...	...	...	...	...	...	...	...	...	...	...	...	8,141
Rateable Value 31-3-55	...	...	...	...	...	...	...	...	...	...	...	...	£149,561
Product of 1d. Rate 31-3-55	...	...	...	...	...	...	...	...	...	...	...	...	£580
District Council General Rate 1954/55	...	...	...	...	...	...	...	...	...	...	...	...	6/-
County Council General Rate 1954/55	...	...	...	...	...	...	...	...	...	...	...	...	15/6

## 2. EXTRACTS FROM VITAL STATISTICS FOR THE YEAR

	Male	Female	Total
Live Births: Legitimate	186	180	366
Illegitimate	11	7	18
<b>Totals</b>	<b>197</b>	<b>187</b>	<b>384</b>

Birth rate per thousand population ... ... ... ... ... ... 13.9

Stillbirths 9. Rate per thousand total births ... ... ... ... ... 22.9

Illegitimate live births represent 4.7 per cent. of total births.

Total deaths from all causes 256.

Crude death rate per thousand population	...	...	...	...	...	...	9.2
Standardised death rate per thousand population	...	...	...	...	...	...	9.7
Number of women dying in or in consequence of childbirth was	...	...	...	...	...	...	2.0
Deaths of infants under one year:—	...	...	...	...	...	...	...
All infants per thousand live births	...	...	...	...	...	...	39.1
Legitimate infants per thousand legitimate live births (15)	...	...	...	...	...	...	41.0
Deaths from Cancer (all ages)	...	...	...	...	...	...	36
Deaths from Pulmonary Tuberculosis (all ages)	...	...	...	...	...	...	4
Deaths from Non-Pulmonary Tuberculosis (all ages)	...	...	...	...	...	...	0
Deaths from Measles (all ages)	...	...	...	...	...	...	0
Deaths from Whooping Cough	...	...	...	...	...	...	1
Deaths from Gastritis, Enteritis and Diarrhoea (all ages)	...	...	...	...	...	...	2

# TADCASTER RURAL DISTRICT

## COMPARABLE VITAL STATISTICS FOR THE YEAR 1954

### Based on Registrar-General's Figures

	Tadcaster Rural District	Aggregate West Riding Rural Districts	West Riding Admin. County	England & Wales (Provi- sional figures)
<b>BIRTH RATE</b>				
(Per 1,000 estimated population) ...	13.9	16.3	15.1	15.2
<b>DEATH RATES :</b>				
(All per 1,000 estimated population)				
All Causes ... ... ... ... ...	9.2	9.9	11.9	11.3
Infective and Para. Dis. excl. Tub., but incl. Syphilis and other V.D.	0.11	0.08	0.08	*
Tuberculosis, Respiratory ... ... ...	0.14	0.12	0.16	0.16
Tuberculosis, Other ... ... ; ...	—	0.02	0.02	0.02
Cancer ... ... ... ... ...	1.30	1.70	2.01	2.04
Vascular Lesions of the Nervous System ... ... ... ...	1.55	1.33	1.84	*
Heart and Circulatory ... ... ...	3.29	3.64	4.54	*
Respiratory Diseases ... ... ...	0.83	1.08	1.22	*
Maternal Mortality :— (Deaths of mothers in childbirth per 1,000 live and stillbirths) ...	5.09	1.10	1.22	0.69
Infant Mortality ... ... ... ...	39.1	27.2	28.0	25.50

\* Figures not available.

COMPARABLE VITAL STATISTICS FOR THE TADCASTER RURAL DISTRICT  
FROM 1940 TO DATE

Year (i)	Estimated Population at Mid-year (ii)	Natural Variation		Live Births		Deaths		Under One Year (ix)	Instant Mortality Rate (per 1,000 live births) (x)
		Increase — (iii)	Decrease (iv)	Total (v)	Rate per 1,000 Population (vi)	Total (vii)	Rate per 1,000 Population (viii)		
1940	23,510	46	—	343	14.50	297	12.63	18	52.40
1941	24,040	56	—	347	14.40	291	12.10	10	26.50
1942	23,650	188	—	438	14.20	250	10.50	18	53.20
1943	20,530	107	—	391	16.60	284	12.00	12	30.60
1944	22,610	158	—	432	19.10	274	12.10	20	46.10
1945	22,510	160	—	455	20.20	295	13.10	23	50.50
1946	20,060	150	—	455	18.90	305	12.70	16	35.00
1947	24,550	206	—	488	19.90	282	11.50	21	43.00
1948	25,260	187	—	424	16.78	237	9.38	12	28.00
1949	25,530	123	—	411	16.10	288	11.28	10	24.30
1950	26,850	135	—	407	15.16	272	10.13	10	24.57
1951	26,980	101	—	372	13.80	271	10.00	7	18.80
1952	26,980	85	—	366	13.60	281	10.40	8	21.90
1953	26,880	124	—	418	15.60	294	10.90	14	33.50
1954	27,680	128	—	384	13.90	256	9.20	15	39.10

## CAUSES OF CIVILIAN DEATHS

### Registrar-General's Abridged List of Causes of Deaths in the District during 1954

Cause	Number		
	Male	Female	Total
1. Tuberculosis (Respiratory) ... ... ... ...	2	2	4
2. Tuberculosis (Other) ... ... ... ...	—	—	—
3. Syphilitic Disease ... ... ... ...	1	—	1
4. Diphtheria ... ... ... ...	—	—	—
5. Whooping Cough ... ... ... ...	—	1	1
6. Meningococcal Infections ... ... ... ...	—	—	—
7. Acute Poliomyelitis ... ... ... ...	—	—	—
8. Measles ... ... ... ...	—	—	—
9. Other Infective and Parasitic Diseases ... ...	1	—	1
10. Malignant Neoplasm (Stomach) ... ...	3	6	9
11. Malignant Neoplasm (Lung Bronchus) ... ...	2	—	2
12. Malignant Neoplasm (Breast) ... ...	—	5	5
13. Malignant Neoplasm (Uterus) ... ...	—	2	2
14. Other Malignant Lymphatic Neoplasms ... ...	7	9	16
15. Leukaemia (Aleukaemia) ... ... ...	2	—	2
16. Diabetes ... ... ... ...	—	1	1
17. Vascular Lesions of Nervous System ... ...	19	24	43
18. Coronary Disease (Angina) ... ... ...	25	10	35
19. Hypertension with Heart Disease ... ...	3	5	8
20. Other Heart Disease ... ... ...	15	24	39
21. Other Circulatory Disease ... ... ...	6	3	9
22. Influenza ... ... ... ...	1	—	1
23. Pneumonia ... ... ... ...	8	3	11
24. Bronchitis ... ... ... ...	6	2	8
25. Other Diseases of Respiratory System ... ...	1	2	3
26. Ulcer of Stomach and Duodenum ... ...	—	2	2
27. Gastritis, Enteritis and Diarrhoea ... ...	1	1	2
28. Nephritis and Nephrosis ... ... ...	1	3	4
29. Hyperplasia of Prostate ... ... ...	3	—	3
30. Pregnancy, Childbirth, Abortion ... ...	—	2	2
31. Congenital Malformations ... ... ...	1	4	5
32. Other Defined and Ill-defined Diseases ... ...	11	9	20
33. Motor Vehicle Accidents ... ... ... ...	2	—	2
34. All Other Accidents ... ... ... ...	8	2	10
35. Suicide ... ... ... ...	3	1	4
36. Homicide and Operations of War ... ... ...	1	—	1
Total ... ...	<u>133</u>	<u>123</u>	<u>256</u>

From the Registrar-General's list of causes of death in the District during 1954 it will be seen that the most frequent causes of death, the number of deaths so registered and the corresponding death rates per thousand population were:—

Heart and Circulatory ... 91 deaths equivalent to a death rate of 3.29  
Intra Cranial Vascular

Lesions ... ... ... ... 43 deaths equivalent to a death rate of 1.55  
Cancer ... ... ... ... 36 deaths equivalent to a death rate of 1.30  
Pneumonia ... ... ... ... 11 deaths equivalent to a death rate of 0.39  
Accidents ... ... ... ... 10 deaths equivalent to a death rate of 0.36  
Bronchitis ... ... ... ... 8 deaths equivalent to a death rate of 0.28

## **SANITARY CIRCUMSTANCES OF THE AREA**

The Chief Sanitary Inspector outlines in some detail the Sanitary Circumstances of the area in the latter part of this report.

### **Housing**

It will be seen from the figures given by Mr. Witheford that the number of Council Houses completed in 1954 was about two-thirds of the number in 1953, but against that it will be noted that the number of houses in course of construction at the end of the year gave promise of a more fruitful harvest in 1955.

Production of the Housing Repairs and Rent Act of 1954 resulted in the Council seriously considering its policy in regard to Slum Clearance and Improvement Grants. The Repairs Section of the Act which enables a Landlord legally claiming increased rent does not appear as far as we are aware to such action having been taken in very many cases.

When the Slum Clearance Sections of the Act were considered by a Joint Committee of the Health and Housing Committees it was found that the Chief Sanitary Inspector was able to produce very quickly from the Rural Housing Survey an estimated figure of the number of Slum Clearance Properties in the area which will have to be dealt with. Excluding those houses still occupied in the Bowers Row area in the Autumn of 1954 the problem the Council has to face appears to be in round figures 500 houses in a 5-year programme. The Council made two important decisions, namely, that it would make itself responsible for re-housing those people displaced from Slum Property, and secondly that the Council does not propose to purchase Slum Property with the idea of reconditioning at public expense.

Inspection of Slum Property under the 5-year programme commenced early in November, and the figures shown in the Chief Sanitary Inspector's Report give an indication of the amount of work it was found possible to do before the end of the year. In Committee and in Council the Chief Sanitary Inspector has been commended for the promptitude with which he was able to facilitate the Council's discussion, and I want to record here my appreciation, too.

### **Sewerage and Sewage Disposal**

The Council's Works Management Committee still found itself seriously hindered in carrying out Schemes already prepared by the continued limitation on capital expenditure. In particular the Council found itself in grave difficulty with regard to the Scheme for Appleton Roebuck, Bolton Percy and Ulleskelf. A Public Enquiry was held into the Council's Scheme for Sewerage and Sewage Disposal in Tadcaster Township.

## Water Supply

The Hook Moor Water Scheme was put into operation in August, 1954, and as a result a substantial part of the Council's area has benefited by more adequate supplies. The Scheme to implement the Water Supply in Tadcaster itself made administrative progress, and one hopes the implementation of the Scheme will take place at a none too distant date.

## Scavenging Service

The delivery of an additional refuse freighter made it possible to arrange for the whole of the district to be dealt with by direct labour for the first time.

## PREVALENCE AND CONTROL OF INFECTIOUS DISEASE

The following cases of Infectious Disease were notified during the year :—

Disease	Total	Cases sent to Hospital	Deaths
Scarlet Fever	45	8	—
Whooping Cough	169	1	1
Poliomyelitis	1	1	—
Measles	49	1	—
Acute Pneumonia	15	—	11
Erysipelas	6	2	—
Food Poisoning	5	—	—
Puerperal Pyrexia	—	—	—
Dysentery	2	—	—
Typhoid Fever	1	1	—

### COMMENTS :

There is very little in this Table which calls for comment, but it is hoped that the fuller use of the facilities now available for Whooping Cough Vaccination will result in a much reduced incidence of this distressing disease.

The case of Typhoid Fever reported above shows that what could have been a serious outbreak of the disease was successfully avoided. Nevertheless it took the Sanitary Inspectors and myself a full month of hard work and some anxiety before we could satisfy ourselves as to the source of infection and the unlikeness of further cases arising.

## TUBERCULOSIS

The following figures show the state of the register at 31-12-54.

Pulmonary		Non-Pulmonary		Total
M.	F.	M.	F.	
31	40	12	12	95

This is a decrease of 7 cases over the figures at 31-12-53.

## CIVILIAN TUBERCULOSIS

Analysis of new notifications and deaths from Tuberculosis  
during year :—

Age	New Cases						Deaths					
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary		M.		F.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
0- 1 ... ...	—	—	—	—	—	—	—	—	—	—	—	—
1- 5 ... ...	—	—	—	—	—	—	1	...	—	—	—	—
5-15 ... ...	2	—	...	—	1	1	...	—	—	—	—	1
15-25 ... ...	—	4	...	—	—	—	...	—	—	—	—	—
25-35 ... ...	3	2	...	2	—	—	...	—	—	—	—	—
35-45 ... ...	1	—	...	—	—	—	...	1	—	—	—	—
45-55 ... ...	3	1	...	—	—	—	...	1	—	—	—	—
55-65 ... ...	—	—	...	1	—	—	...	—	1	...	—	—
65 and over ... ...	1	1	...	—	—	—	...	—	1	...	—	—

Service Cases : Nil.

**Report as  
Divisional Medical Officer  
for 1954**

## CLINIC ARRANGEMENTS IN DIVISION No. 9

### (Tadcaster and Wetherby Rural Districts).

Abbreviations : A.N.—Ante-Natal. I.W.—Infant Welfare. E.N.T.—Ear, Nose and Throat. T.B.—Tuberculosis.

TOWNSHIP	LOCATION	PURPOSE	DAY AND TIME
<b>MEDICAL OFFICERS' CLINICS (Static)</b>			
Bardey	Trustees Hall.	I.W. A.N./I.W.	Alternate Mondays, 1-30 p.m. Alternate Tuesdays, 1-30 p.m.
Barwick-in-Elmet	Methodist Schoolroom	A.N./I.W.	Alternate Wednesdays, 1-30 p.m.
Boston Spa	West End Nursery School.	A.N./I.W.	Alternate Wednesdays, 1-30 p.m.
Church Fenton	Methodist Sunday School.	A.N./I.W.	Alternate Thursdays, 1-30 p.m.
Church Fenton	R.A.F. Station.	A.N./I.W.	Alternate Thursdays, 1-30 p.m.
Micklefield	Methodist Chapel.	A.N./I.W.	Alternate Tuesdays, 1-30 p.m.
Sherburn-in-Elmet	Methodist Sunday School.	A.N./I.W.	Alternate Tuesdays, 1-30 p.m.
Swillington	Wakefield Road (Hut nr. Church).	( A.N./I.W. ( Minor Ailment. ( A.N.	Every Thursday, 1-30 p.m. Every Wednesday, 9-30 a.m.
		( I.W.	Alternately Wednesday, 10-0 a.m., and Friday, 1-30 p.m.
		( Minor Ailment.	Alternate Tuesdays, 1-30 p.m.
		( Speech Therapy.	Every Tuesday and Thursday, 9-30 a.m.
		( Ultra Violet Light.	Every Thursday, 9-30 a.m. Every Monday and Thursday, 9-30 a.m. (Winter months only).
Tadcaster	Multiple Clinic, Leeds Road.	A.N./I.W.	Alternate Mondays, 1-30 p.m.
Tockwith	Methodist Sunday School.	( A.N. ( I.W.	Alternate Wednesdays, 1-30 p.m. Every Thursday, 1-30 p.m.
		( Minor Ailment.	Every Thursday, 9-30 a.m.
		( Speech Therapy.	Every Tuesday, 2 p.m.
Wetherby	Crossley Street.	A.N./I.W.	Alternate Thursdays, 10 a.m. Alternate Fridays, 2 p.m.
		A.N./I.W.	Alternate Fridays, 10 a.m.
		A.N./I.W.	Alternate Fridays, 2 p.m.
		A.N./I.W.	Alternate Wednesdays, 10 a.m.
		A.N./I.W.	Alternate Wednesdays, 2 p.m.
<b>MEDICAL OFFICERS' CLINICS (Mobile)</b>			
Appleton Roebuck	Village Green	( T.B.	2nd and 4th Tuesday each month, 10 a.m.
Copmanthorpe	Lower Green	( Ophthalmic	Every alternate Friday, 9-30 a.m.
East Keswick	Village Institute	( E.N.T.	Every 4th Tuesday, 9-30 a.m.
Hutny	Village Institute	( Paediatric.	2nd Wednesday each month, 2 p.m.
Ledston	Village Institute	( Orthopaedic	1st Thursday each month, 1-30 p.m.
Thorner	Village Institute	( Ophthalmic.	Every alternate Friday, 1-30 p.m.
<b>CONSULTATIVE CLINICS</b>			
Tadcaster	Multiple Clinic, Leeds Road.		
Wetherby	Crossley Street.		

## **PART II. REPORT AS DIVISIONAL MEDICAL OFFICER**

As has been the practice since the Scheme of Divisional Health Administration, started in the West Riding in 1947, this Section is inserted to acquaint the Council with the work carried out from the Divisional Health Office under your Medical Officer of Health in his capacity as Divisional Medical Officer to the West Riding County Council.

The detailed information given relates to the area covered by the Tadcaster and Wetherby Rural Districts.

During the course of the year two members of the District Nursing Service, namely, Miss L. Evamy in Wetherby and Mrs. E. Linley in Thorner, retired. Both these ladies have served the district for many years and the Wetherby Council placed on record its appreciation of the work done.

Neither vacancy was filled before the end of the year, the work being carried out by existing members of the Divisional Nursing Staff.

Miss Leng, the Home Teacher of Mental Defectives, had to resign her appointment in August on her removal to the West of England. This vacancy also has not yet been filled, Miss Leng's work having been undertaken since her departure by Miss Glover, the Mental Health Social Worker.

### **SCHOOL MEDICAL SERVICE**

School Medical work here is based on an annual visit of a School Medical Officer to each School in the area. At the beginning of the year we offered Routine School Medical Inspection to all children aged 5, 11 and 14, but during the Christmas term invitations were extended in addition to all children aged 8 years. The total number of Routine Medical Examinations carried out was 3,651. 382 re-inspections of defects found at previous examinations were recorded and 26 special examinations were performed at the request of Heads of Schools. 410 individual children were found to have 448 defects requiring treatment and out of the total number of children examined, 1,914 defects were noted for further observation at subsequent examinations. 0.5% of the children seen were estimated to be below average nutrition.

It is our practice to arrange for each School Nurse to examine all children in her Schools for Cleanliness after each principal holiday. 14,182 such examinations were recorded and resulted in 104 children being found to have signs of infestation with lice.

Although it would be pleasing to be able to report that there are no signs of lice infestation among the school children in the area the results reported cannot be regarded as unsatisfactory.

Three Minor Ailment Clinics at Swillington, Tadcaster and Wetherby dealt with 43 cases during the course of the year.

The Dental Officers working in the Division report the following Statistics in respect of the work carried out:—

	Total
Number of children inspected	5,839
Number of children found to require treatment	3,894
Number of children offered treatment	3,376
Number of children treated	1,934
Number of attendances	3,162
Number of extractions:	
Temporary teeth	1,253
Permanent teeth	187
Number of general anaesthetics	2
Number of fillings:	
Temporary teeth	162
Permanent teeth	2,310
Number of other treatments:	
Temporary teeth	52
Permanent teeth	212

The arrangements for Consultative Clinics continue to operate in the same way as last year with the following results:

### **Eye Clinic**

452 children were examined, spectacles were prescribed in 237 cases and I understand spectacles were obtained in 182 cases.

### **Ear, Nose and Throat Clinic**

94 children attended the Monthly Clinic and 35 were referred for operative treatment. 18 of those operations had been carried out by the end of the year.

### **Orthopaedic Clinic**

82 children attended the 11 sessions on 108 occasions. 27 were referred for treatment.

### **Paediatric Clinic**

41 children made 56 attendances at 11 sessions.

In addition, 10 children from this Division were seen at the special Cardiac Centre at Harrogate General Hospital.

### **Speech Therapy Clinic**

36 children received treatment at 140 sessions.

### **Physically Handicapped Children**

It is the duty of the School Medical Officer to ascertain Physically and Mentally Handicapped Children between the ages of 2 years and 16 years. Such cases are referred for

investigation by Heads of Schools, Private Practitioners and Parents. At the moment we have records showing that the following numbers of children from this area are in attendance at the types of Residential Schools shown:—

Type of School	Number
Educationally Sub-Normal ... ... ...	11
Blind ... ... ... ...	3
Maladjusted ... ... ... ...	2
Deaf ... ... ... ...	1
Delicate ... ... ... ...	1

## MATERNITY AND CHILD WELFARE

**Clinic Facilities.** There was no change in the Clinic facilities in the Division during the year, 10 regular sessions being held in permanent buildings and 6 sessions in the Mobile Unit. In all cases arrangements are made for Infant Welfare Work to be carried out in association with Ante-Natal Care.

Towards the end of the year plans were being made for increasing the number of villages served by the Mobile Unit during the period it is at our disposal.

At the Clinics held in permanent buildings 1,063 children attended on 7,786 occasions, together with 107 Expectant Mothers who attended on 359 occasions. 25 mothers attended for Post-Natal examination.

During the three days fortnightly that the Mobile Clinic attended in this Division 1,034 attendances were made at 120 sessions for Infant Welfare purposes and 62 attendances by 16 inothers for Ante-Natal Care.

It should be noted that the villages served by the Mobile Unit would be deprived of Clinic facilities almost entirely were it not for the visits paid by the Mobile Unit.

**Distribution of Welfare Foods.** At short notice about the middle of the year the Divisional Health Office was asked to make arrangements to take over the distribution of welfare foods formerly carried out by the Ministry of Food. This meant undertaking the distribution of National Dried Milk, Orange Juice, Cod Liver Oil in liquid and capsule form at Selling Centres throughout the Division. It was as much to the credit of the former Staff of the Food Office as my own Staff that the change over took place so smoothly. It must also be recorded of the numerous volunteers throughout the area who are actually selling the welfare foods, that not one found it inconvenient to continue under our auspices as in the past. In fact, in thanking these volunteer helpers, the point must be made that resignations have only occurred under dire domestic difficulties. Without being able to quote precise figures and despite an increased availability for sale we have

shared in the National experience of a fall in the sale of welfare foods since the take-over.

**Health Visiting.** During the course of the year the seven Health Visitors working in this Division carried out the following number of routine visits:—

Number of children under 5 years of age visited during year	Expectant Mothers		Children under 1 year of age		Children age 1 and under 2 years		Children age 2 but under 5 years		Tuber- culosis House- hold	Other Cases
	First Visit	Total Visits	First Visit	Total Visits	(6)	(7)	(8)	(9)		
(1)	(2)	(3)	(4)	(5)						
719	157	476	603	4145	1990	3132	3	5404		

It will be noted that the increased number of visits over last year in respect of "Other Cases" is almost wholly accounted for by the work the Health Visitors have to do in respect of the Home Help Service.

## MATERNITY HOME ACCOMMODATION

The following total gives an indication of the place of confinement of mothers normally resident here who bore children during 1954:—

	1953 First Half	1953 Second Half	1954 First Half	1954 Second Half
Hazlewood	127	7	—	—
York Maternity Hospitals	13	32	32	27
Wakefield Hospitals	—	34	22	27
Leeds Hospitals	32	45	32	35
Harrogate General	41	71	57	59
Private Nursing Homes	33	39	51	45
Otley General	1	2	—	—
St. Winifred's, Ilkley	—	1	—	—
Home Confinements	114	152	140	141

The purpose of presenting the above Table is to demonstrate that the number of Home Confinements here has continued to increase as compared with the time prior to the closure of Hazlewood Castle Maternity Home in July, 1953. The Table also demonstrates the distances patients are having to be sent for Maternity Home Accommodation since that time.

It should be put on record that the Divisional Medical Officer has never failed to obtain Maternity Home Accommodation for any case in which admission to Hospital was deemed necessary.

## Domiciliary Midwifery

14 Domiciliary Nurses carried out Midwifery duties and

the following Table details work done:—

**NUMBER OF DELIVERIES ATTENDED BY MIDWIVES IN THE AREA DURING THE YEAR—DOMICILIARY CASES**

	Doctor not booked Doctor present at delivery	Doctor not present at delivery	Doctor booked Doctor present at delivery	Doctor not present at delivery	Totals
Midwives employed by the Authority ...	9	83	53	123	268
Midwives in Private Practice (including Midwives employed in Nursing Home)	—	2	4	—	6
Total	9	85	57	123	274

Number of cases delivered in Institutions but attended by  
domiciliary midwives on discharge from Institutions  
before the fourteenth day ... ... ... ... ... ... 34

**Breast Feeding**

Number of domiciliary cases in which the infant was  
wholly breast fed at the fourteenth day ... ... ... 208

**Statutory Notices received from Midwives**

1. Death of (a) Mother	...	...	...	...	...	...	...	...	—
(b) Child	...	...	...	...	...	...	...	...	—
2. Stillbirths	...	...	...	...	...	...	...	...	6
3. Substitution of Artificial Feeding	...	...	...	...	...	...	...	...	6
4. Liability to be a source of infection	...	...	...	...	...	...	...	...	1
5. Medical Aids issued because of complications arising in/during :									
(a) Pregnancy	...	...	...	...	...	...	...	...	1
(b) Labour	...	...	...	...	...	...	...	...	6
(c) Lying In	...	...	...	...	...	...	...	...	1
(d) The Child	...	...	...	...	...	...	...	...	—

There was a substantial increase in the number of cases which availed themselves of Gas and Air Analgesia. Every midwife in the Division has facilities for Analgesia to be made available to her patient and the offer was accepted on 150 occasions. Pethidine was administered on 66 occasions under prescription by the Private Practitioner in charge of the case.

Relaxation Exercises are taught in each Ante-Natal Clinic where accommodation allows.

## HOME NURSING SERVICE

The 14 Domiciliary Midwives employed here are also Home Nurses, and for half of the year one whole time Home Nurse gave service in the area.

		Number of cases attended by Home Nurses during the year	Number of visits paid by Home Nurses during the year
(1) Medical	... ... ... ...	916	20,276
(2) Surgical	... ... ... ...	431	7,295
(3) Infectious Diseases	... ...	4	24
(4) Tuberculosis	... ... ...	21	710
(5) Maternal complications	...	6	32
		<hr/>	<hr/>
	Totals	1,378	28,337
		<hr/>	<hr/>

Patients included in above who were aged 65 or over at the time of the first visit during the year ... ... ... ...

516

15,353

Children included in above who were under 5 years of age at the time of the first visit during the year ... ... ...

111

859

Patients included in above who have had more than 24 visits during the year ... ... ...

215

11,029

No less than 4,491 visits were made for the purpose of giving injections of modern therapeutic agents prescribed by Practitioners.

## PREVENTION OF ILLNESS—CARE AND AFTER CARE

### (i) Tuberculosis

Elsewhere in the report will be found details of the Notifications of Tuberculosis during 1954. The home of each notified case is visited by the Tuberculosis Health Visitor, who reports on the environmental background. In addition, this specialist visitor carries out contact tracing in accordance with the wishes of the Chest Physician in charge of the case. It is noteworthy that this area is served by no less than 5 Principal Chest Physicians and a further 12 who see occasional cases from this area. Although the co-operation of these gentlemen with the Medical Officer of Health leaves nothing to be desired, with the best will in the world it is not easy to keep track of the true state of the Tuberculosis Register when so many people are involved.

During 1954 Mrs. Askam visited 1,635 homes and the Chest Physicians tell me that 21 children known contacts of Tuberculosis received B.C.G. Vaccination.

Under the County Council Scheme of providing extra

nourishment in the form of daily milk, 35 patients were granted authority to receive such supplies.

About the middle of the year the Miniature Mass Radiography Unit visited Tadcaster and Wetherby and the following figures are of interest:—

Survey Undertaken at	Number Examined	Abnormalities Discovered			Total
		Active	Inactive	Other	
(1)	(2)	(3)	(4)	(5)	(6)
Tadcaster	1,183	1	3	4	8
Wetherby	900	2	1	6	9

Advantage was taken of this visit to extend an invitation to the Staffs of the District Councils and the County Council to submit themselves for examination. In particular, invitations were extended to School Masters and School Mistresses but unfortunately the response could have been better.

### (ii) MENTAL HEALTH SOCIAL WORK

Miss Glover, the Mental Health Social Worker, had 73 cases under Legal or Voluntary Supervision at the end of the year and in addition she has tried to continue Occupational Therapy started by Miss Leng before her resignation.

In this connection we are somewhat handicapped by difficulty in disposing of articles made by Handicapped people. The goods produced are in the main wool rugs and dish cloths and the prices for sale are reasonable. We should welcome enquiries from prospective purchasers to allow us to continue offering home employment to those Handicapped people known to us.

### (iii) DIPHTHERIA IMMUNISATION

The Scheme for Diphtheria Immunisation in the area continues along the same lines as in previous years, namely, through the medium of Private Practitioners and Medical Officers at the Clinics in the area.

Boosting Doses are suggested on entry into School and again at the age of 10 years. It is with pleasure one is able to report that no case of Diphtheria was notified during the year but at the same time it would be better to be able to report that a greater proportion of children under the age of one year were, in fact, being immunised here.

The Return submitted to the Ministry of Health in respect of 1954 reads as follows:—

Age at 31-12-54 i.e. Born in Year	Under 1 1954	1-4 1953-1950	5-9 1949-1945	10-14 1944-1940	Under 15 Total
Last complete course of injections (whether primary or booster)					
A. 1950-1954 ... ...	88	1,480	2,667	1,475	5,710
B. 1949 or earlier ... —		—	664	1,258	1,922

These figures mean that as far as the Department can tell only about 60% of children below School Age are being immunised. This figure must more nearly approximate to 80% before one can be reasonably satisfied about the position. The immunisation carried out at all sources during 1954 is shown in the following Table:—

	AGE AT FINAL INJECTION								Total
	Under 1.	1.	2.	3.	4.	5 to 9.	10 to 14.		
1. Number of children who completed a full course of primary immunisation (inc. temporary residents)	248	175	22	11	20	351	92	919	
2. Total number of children who were given a secondary or re-inforcing injection (i.e., subsequent to complete full course)						6	866	625	1497

#### (iv) WHOOPING COUGH VACCINATION

The County Council Scheme for vaccinating children under the age of 4 years against Whooping Cough continues but unfortunately restricts the antigen to Whooping Cough vaccine alone. Despite this, many Private Practitioners are using the combined protection against Diphtheria and Whooping Cough, and we hope the time will not be far distant before the same protective substance is available to County Council Medical Officers. It should be made clear that records of vaccination against Whooping Cough performed by Private Practitioners with the double antigen are accepted by the Department and are included in the report that 398 children were so vaccinated during the year. From my records there would now appear to be 855 children in the area who have been vaccinated against Whooping Cough to date. No case has come to my notice of a child contracting Whooping Cough subsequent to vaccination.

#### (v) VACCINATION AGAINST SMALLPOX

From records available to me from Private Practitioners and from Clinic Medical Officers the following number of persons were vaccinated against Smallpox.

Age at Date of Vaccination	Under 1	1	2 to 4	5 to 14	15 or over	Total
Number Vaccinated ...	207	127	28	19	26	407
Number Re-vaccinated	—	—	3	5	47	.55

It is interesting to compare these figures with those recorded last year in so far as the bulk of the vaccinations against smallpox in 1954 was in respect of children below the age of 2 years. At the same time these figures present the disquieting position that less than 25% of such children have

been protected against smallpox. It is a Clinical fact that vaccination carried out at this early age is attended by very little risk. It should be noted that modern methods of vaccinating against smallpox produce much less scarring at the site of vaccination than was formerly the case.

## VACCINATION AGAINST TUBERCULOSIS

To one who remembers the introduction of a National Scheme of immunisation against Diphtheria, and the subsequent rarity of that disease, it was particularly gratifying to be able to introduce into this area the Scheme for Vaccinating Older School Children against Tuberculosis.

This Scheme is based on the knowledge that almost everyone in this country becomes infected with Tuberculosis sooner or later and that one of the periods of life in which many people break down with the disease is between the ages of 15 and 25 years.

The aim of vaccinating against Tuberculosis is to give to those children who have not previously been infected a known dose of the killed germ which, though not capable of causing disease, is capable of stimulating resistance to it.

The Scheme of what is called B.C.G. Vaccination aims at immunising children who are 13 years of age as nearly as possible to their 14th birthday. Before a vaccination is carried out each child is tested for evidence of previous infection. Where no such evidence exists a child is vaccinated and the test repeated six weeks later to check that protection has been produced.

In this area we are visiting the Schools where Senior children attend, three times per year, and offering vaccination to children who are between the ages of 13 years 6 months and 14 years on 1st January, 1st May and 1st September.

The first such visit took place in the Autumn Term of 1954, when 162 parents were invited to allow their children to be vaccinated. 96 Consent Forms were returned and 89 children were fully dealt with. 49 children showed evidence of previous infection and 40 children were vaccinated. All the children who were vaccinated showed evidence of conversion to the Tuberculin Positive state.

I believe B.C.G. Vaccination has great potentialities for the future and I earnestly commend to every parent of an Older School Child in this area the wisdom of giving consent to carrying out this protective practice in the case of their child.

It should be made clear that at the moment this procedure is only available through the School Medical Service unless the child is a known contact of Tuberculosis, and it is only available during the child's 14th year. These points are emphasised to

explain the necessity for parental consent to be given at the time it is asked for.

### **HOME HELP SERVICE**

The Home Help Service continues to provide substantial help in the Division and it has, on occasion, been difficult to meet demands within the establishment laid down. The following number of cases received service:—

1. Maternity (including expectant mothers) ... ... ...	67
2. Tuberculosis ... ... ... ...	4
3. Chronic Sick, including aged and infirm ... ... ...	93
4. Others ... ... ... ...	34
	198

These cases received 32,225 hours' service.

### **WELFARE OF THE AGED**

The Divisional Medical Officer was privileged to be appointed Secretary of the Wetherby Old Peoples' Welfare Executive Committee and by virtue of this appointment it has been found possible to forward the interests of the aged. In the Tadcaster area the Divisional Medical Officer is a member of the Executive Committee.

It is believed that arrangements made in these two Rural Districts are probably the best example of local voluntary effort through the medium of the Parish Welfare Committees which could be found in any Rural District anywhere. The establishment of Darby and Joan Clubs in many villages is a source of great interest and encouragement to all concerned and acknowledgment is frequently made of the generosity of the County Council's Welfare Department in providing equipment free on indefinite loan.

Nowhere in the Division do the Parish Committees appear to be happy about the position in respect of Chiropody Service. It is surprising that a service which is so much appreciated by the aged should have to depend for its continuance on such an entirely voluntary basis. It is frequently represented that a service such as this should be within the purview of the National Health Service Act.

In neither Rural District has it been found practicable to provide a Meals' Service for the aged.

### **CARE OF CHILDREN NEGLECTED OR ILL TREATED IN THEIR OWN HOMES**

The Divisional Committee continues to meet bi-monthly and the best that can be reported is that satisfying results can only be expressed on the long-term picture.

# TADCASTER RURAL DISTRICT COUNCIL

## ANNUAL REPORT of the CHIEF SANITARY INSPECTOR FOR THE YEAR 1954

Council Offices,  
TADCASTER.

To the Rural District Council of Tadcaster.

Mr. Chairman, Ladies and Gentlemen,

Once again, I have the privilege of submitting for your information the Annual Report of the work of the Sanitary Department for the year ending 31st December, 1954.

Your district may be described as a typical well-balanced rural unit, particularly in respect of size, population and rateable value. It is situated in lower Wharfedale, and the boundaries are contiguous with those of the Cities of Leeds and York; the Urban Districts of Rothwell, Garforth and Castleford; and the Rural Districts of Wetherby, Nidderdale, Derwent, Selby and Osgoldcross. No changes in respect of the boundaries took place during the year. Two main trunk roads pass through the district, these being A.1 (The Great North Road) and A.64 (Leeds, Tadcaster, York, Malton and Scarborough).

Agriculture is still the predominant industry, including much farm land in the Vale of York. In the town of Tadcaster itself there is an old but extensive brewing industry.

Part of the western side of the district is on the eastern edge of the West Yorkshire Coalfield, and several villages are almost entirely engaged in the mining of coal. Other industries are mainly the manufacture of weighing machines (a post-war establishment), gas works plant, and the building of motor bus and coach bodies, a large Bacon Factory, and considerable railway sidings and junction activity. There are also several other large establishments which come under control of the responsible departments of the Crown.

Details of the work of the Department will be found in the appended report.

I take this opportunity to express my appreciation of the assistance given by the Chairman, Members, and Officials of your Council.

I am, Ladies and Gentlemen,  
Your Obedient Servant,  
ERNEST WITHEFORD,  
Chief Sanitary Inspector.

TABLE I

This table given below indicates, in Parish Order, many of the main details relating to the Sanitary circumstances of the District, as follows:—

	Area Acres	Census 1951	No. of Dwell.	R.V.	Piped Water	Refuse Coll.	Sewage Dispos.
Aberford	1580	710	259	3391	225	Yes	Yes
Acaster Malbis	1874	959	69	1553	50	Yes	No
Acaster Selby	1542	75	19	576	14	Yes	No
Appleton Roebuck	2914	403	134	2436	112	Yes	Yes
Askham Bryan	2529	419	121	3648	113	Yes	Yes
Askham Richard	982	213	41	831	31	Yes	No
Austhorpe	869	314	69	6007	66	Yes	Yes
Barkston Ash	1168	234	96	1087	90	Yes	Yes
Barwick-in-Elmet	6535	2908	1078	20115	1036	Yes	Yes
Biggin	713	123	32	252	16	Yes	No
Bilbrough	1447	188	53	1191	45	Yes	Yes
Bishopthorpe	705	1182	416	7009	413	Yes	Yes
Bolton Percy	2334	241	77	1097	74	Yes	No
Catterton	742	44	8	109	8	Yes	No
Colton	1208	151	41	626	33	Yes	Yes
Copmanthorpe	1658	736	258	3440	258	Yes	Yes
East Tadcaster	578	2018	631	8294	631	Yes	Yes
Great & Little Preston	1039	1197	340	3307	340	Yes	Yes
Grimston	888	47	16	533	10	Yes	No
Healaugh	2771	214	62	977	62	Yes	Part
Huddleston-with-							
Newthorpe	1572	108	30	601	12	Yes	No
Kirk Fenton	1977	642	214	2816	206	Yes	Yes
Kirkby Wharfe	1239	110	34	475	27	Yes	No
Lead	1057	34	9	91	1	Yes	No
Little Fenton	781	89	21	235	19	Yes	No
Ledsham	1971	236	77	1585	62	Yes	Part
Ledston	1985	412	110	3469	98	Yes	Yes
Lotherton-cum-Aberford	1093	302	92	1354	89	Yes	Yes
Micklefield	1777	1693	609	6836	606	Yes	Yes
Newton Kyme	1373	158	52	1139	46	Yes	No
Oxton	660	48	12	461	10	Yes	No
Parlington	1773	164	53	517	35	Yes	Yes
Ryther-cum-Ozendyke	2707	249	79	1024	55	Yes	Part
Saxton-cum-							
Scarthingwell	2720	299	89	1113	72	Yes	Yes
Sherburn-in-Elmet	4859	2686	842	16806	825	Yes	Yes
South Milford	3100	1160	367	4929	301	Yes	Yes
Steeton	1142	38	12	301	10	Yes	No
Sturton Grange	877	88	8	138	5	Yes	No
Stutton-cum-Hazlewood	2795	483	127	1593	88	Yes	Part
Swillington	2585	2027	607	10276	601	Yes	Yes
Towton	887	134	44	457	44	Yes	Yes
Ulleskelf	1322	1031	120	8714	105	Yes	Yes
West Tadcaster	1500	2384	732	18152	732	Yes	Yes

75833 26951 8160 149561 7676

## NEW HOUSING PROGRESS—1954

The figure of New Dwellings constructed during 1954 shows a drop as compared with those in 1953, being 134 as against 181 in 1953. It will, however, be seen that at the end of the year there was a high number of houses under construction, these being principally on the new estates at Great Preston, Micklefield, Sherburn and Swillington.

The estimated total number of applicants at the end of the year for the tenancy of Council houses was 1,320.

The table below indicates in Parish order the houses completed, together with those being constructed at the end of the year.

	New houses completed		New houses under construction		Adaptations
	Council	Private	Council	Private	
Aberford ... ... ...	—	1	—	—	—
Askham Bryan ...	—	2	—	—	—
Austhorpe ... ... ...	—	—	—	1	—
Barkston Ash ... ...	—	1	—	—	—
Barwick-in-Elmet ...	—	25	—	6	—
Bilbrough ... ... ...	—	—	—	1	—
Bishopthorpe ... ... ...	—	6	12	4	—
Colton ... ... ...	—	—	—	1	—
Copmanthorpe ... ... ...	—	7	—	2	—
East Tadcaster ...	—	5	—	—	—
Great & Little Preston	10	3	78	1	—
Healaugh ... ... ...	—	—	—	2	—
Kirk Fenton ... ... ...	—	—	20	1	—
Little Fenton ... ... ...	—	—	—	1	—
Ledsham ... ... ...	—	—	—	—	3 Flats
Lotherton ... ... ...	—	—	—	3	—
Micklefield ... ... ...	32	—	44	—	—
Newton Kyme ... ... ...	—	1	—	—	—
Sherburn ... ... ...	2	2	76	3	—
South Milford ... ... ...	4	—	8	—	—
Steeton ... ... ...	—	—	—	1	—
Swillington ... ... ...	13	4	58	16	—
Towton ... ... ...	8	—	—	—	—
West Tadcaster ...	—	5	—	6	—
	—	—	—	—	—
	69	62	296	49	3
	—	—	—	—	—

## HOUSING ACTS, 1936 TO 1954

The Housing Repairs and Rents Act, 1954, which came into operation during August enabled your Council to increase the number of Representations being considered. This was facilitated by reference to the Rural Housing Survey records kept in the Department being available at very short notice.

These Rural Housing Survey records were also used by the

Council to help prepare the statement of the five years' programme for the clearance of unfit properties required by the Minister under Circular No. 55/54. A Sub-Committee of your Public Health and Housing Committees met in October to consider this item, and Table 1 indicates the position at the date of that meeting.

### HOUSING ACTS, 1936 TO 1954

TABLE 1

PARISH	Original Survey Total	No. in confirmed orders not rehoused	Already dealt with	Remaining to be represented	Total to be rehoused
Aberford	65	—	5	60	60
Acaster Malbis	7	4	1	2	6
Acaster Selby	1	—	—	1	1
Appleton Roebuck	1	—	—	1	1
Askham Bryan	15	—	2	13	13
Askham Richard	1	—	—	1	1
Austhorpe	6	—	2	4	4
Barkston Ash	21	2	13	6	8
Barwick-in-Elmet	31	—	11	20	20
Biggin	7	2	2	3	5
Bilbrough	7	—	1	6	6
Bishopthorpe	14	—	5	9	9
Bolton Percy	3	—	—	3	3
Catterton	—	—	—	—	—
Colton	5	—	1	4	4
Copmanthorpe	14	—	1	13	13
East Tadcaster	59	—	3	56	56
G. & L. Preston	195	84	50	61	145
Grimston	—	—	—	—	—
Healaugh	6	—	—	6	6
Huddleston-with-					
Newthorpe	1	—	—	1	1
Kirk Fenton	18	7	4	7	14
Kirkby Wharfe	1	—	—	1	1
Lead	—	—	—	—	—
Little Fenton	1	1	1	—	1
Ledsham	13	1	—	12	13
Ledston	8	—	1	7	7
Lotherton-cum-Aberford	17	1	7	9	10
Micklefield	21	—	—	21	21
Newton Kyme	—	—	—	—	—
Oxton	—	—	—	—	—
Parlington	—	—	—	—	—
Ryther-cum-Ozendyke	8	—	—	8	8
Saxton-cum-					
Scarthingwell	16	9	7	—	9
Sherburn-in-Elmet	15	3	—	12	15
South Milford	11	—	1	10	10
Steeton	—	—	—	—	—
Sturton Grange	—	—	—	—	—
Stutton-cum-Hazlewood	23	—	2	21	21
Swillington	22	—	11	11	11
Towton	3	—	1	2	2
Ulleskelf	13	—	6	7	7
West Tadcaster	103	—	2	101	101
Totals	752	114	140	499	613

Table 2 gives the details in respect of the Representation of Individual Unfit Houses and subsequent action up to the end of the year. It also shows the number of houses demolished during the year, including those which were the subject of orders made in previous years.

**Table 2**

Parish	No. of Reps'ns	Demolition Orders	Undertakings Accepted	Houses Demolished
Aberford	...	—	—	2
Appleton Roebuck	...	1	—	1
Acaster Malbis	...	1	—	—
Barwick	...	—	—	3
Bishopthorpe	...	11	1	—
Great and Little Preston	8	—	—	17
Copmanthorpe	...	1	—	—
Kirk Fenton	...	17	4	3
Micklefield	...	51	—	—
Sherburn	...	14	—	—
South Milford	...	6	—	—
Swillington	...	3	—	4
	—	—	—	—
	114	8	3	28
	—	—	—	—

### **Great and Little Preston (Bowers Row) Clearance Order No. 1**

During the year 18 families were re-housed from the above area, and a total of 17 houses demolished in the same period.

### **Housing Act, 1949**

Under this Act the Council are authorised to make grants to owners for the improvement of existing houses, the grant being up to fifty per cent. of the cost of the improvement works. The Council recommended that grants be made in 15 cases; in 3 cases it was decided that no grants be made.

During the year 7 dwellings were improved with the aid of grants, these being at:

Aberford	...	...	...	...	...	2
East Tadcaster	...	...	...	...	1	
Healaugh	...	...	...	...	2	
Huddleston	...	...	...	...	2	

### **Housing Repairs and Rents Act, 1954**

Ten applications for Certificates of Disrepair were received shortly after this Act came into force. The houses were inspected in detail and reported to the Council, who authorised the issue of the appropriate certificates of disrepair. Generally speaking, the number of applications received did not come up to the number expected.

## DRAINAGE, SEWERAGE AND SEWAGE DISPOSAL

The following parishes are provided with sewerage and sewage disposal facilities:—

Aberford, Appleton Roebuck, Askham Bryan, Austhorpe, Barkston Ash, Barwick-in-Elmet, Bishopthorpe, Bilbrough, Colton, Copmanthorpe, East Tadcaster, Great and Little Preston, Kirk Fenton, Ledston, Lotherton, Micklefield, Parlington, Saxton, Sherburn-in-Elmet, South Milford, Swillington, Towton, Ulleskelf, West Tadcaster.

Of these, only the sewage disposal works at Askham Bryan, Bilbrough, Micklefield, Sherburn-in-Elmet, Swillington and Towton can be regarded as being up to modern standards.

Drainage facilities are afforded by the Leeds Corporation in respect of the Wellington Hill and Seacroft portions of Barwick and also for a few properties in Austhorpe. A number of properties at Great Preston and Swillington Common are drained into the sewers of the Garforth Urban District Council.

Inadequacy of the disposal facilities still exists in some of the parishes due to works being obsolete or to the sewage receiving only tank treatment. Legal proceedings were commenced against the Council in respect of the alleged unsatisfactory effluents from Copmanthorpe and Appleton Roebuck being discharged into a water course under the control of a local drainage board.

Several schemes have been prepared in the post-war years by the Council's Consultant Engineer and your own Engineer and Surveyor, and the position regarding these schemes at the end of the year was as follows:—

Appleton Roebuck, Bolton Percy: One Scheme—still with the Ministry of Housing and Local Government.

Barkston Ash, Saxton and Church Fenton: One Scheme—approved, but commencement deferred owing to economic situation.

Bishopthorpe and Copmanthorpe: One Scheme—approved; ready for advertisement for tenders.

East and West Tadcaster and Stutton: One Scheme—Inquiry held by Minister during year, but outcome of inquiry not received.

Bilbrough: One Scheme—completed during year.

Barwick: One Scheme (to replace the three old and inadequate works at Barwick, Scholes and Arthursdale) and to provide new sewers—being revised in accordance with Minister's recommendations.

Ledston Luck: One scheme to replace inadequate works—expected to be completed early in 1955.

Ledsham: One Scheme to provide complete new works and

sewers for the village—being revised in accordance with Minister's recommendations.

Some of the other smaller parishes still lack these amenities, but no doubt they will be considered when the time is opportune in respect of Acaster Malbis, Askham Richard, Healaugh and Newthorpe. In parishes like Newton Kyme and Ryther the properties are widely scattered and the possibility of them being sewered is very remote.

## PRIVY REPLACEMENTS

The Council have continued to make provision in the annual estimates for the replacement of existing privies and pail closets. Although this work proceeds steadily each year the Department is not pressing for it to be done in certain parts of the district where the requisite facilities are lacking.

Replacement can be done in two ways, viz. :—

By the service of Statutory Notices under Section 47 of the Public Health Act, 1936, the Council being required to pay half the cost of the work reasonably incurred.

By owners voluntarily carrying out the work in which case the Council make a grant towards the cost. During the year the grant was increased from ten to fourteen pounds.

49 Replacements were carried out during the year, as follows :—

Aberford	...	...	...	...	4
Asham Bryan	...	...	...	...	5
Barwick-in-Elmet	...	...	...	...	3
Bolton Percy	...	...	...	...	1
Catterton	...	...	...	...	1
Colton	...	...	...	...	1
East Tadcaster	...	...	...	...	1
Great and Little Preston	...	...	...	...	1
Healaugh	...	...	...	...	2
Huddleston	...	...	...	...	2
Kirk Fenton	...	...	...	...	4
Kirkby Wharfe	...	...	...	...	1
Micklefield	...	...	...	...	8
South Milford	...	...	...	...	15
				—	
				49	

With the completion during the year of the Hook Moor Water Scheme the Council considered the question of the replacement of the privies at Micklefield, and as a result of this 50 Statutory Notices were served towards the end of the year in respect of the houses in Sunny Bank and West View.

## WATER SUPPLY

In addition to the Council's own supply from Bilbrough, water is purchased in bulk from two other water undertakers, the Leeds Corporation and the York Waterworks Company. A description of the various water supplies, both public and private, is given below:—

### **Leeds Corporation—Upland Surface Water**

This water is derived from impounding reservoirs owned by the Corporation, and situated at Fewston and Swinsty. It is purchased in bulk by your Council for distribution to the following parishes:—

Aberford, Austhorpe, Barkston Ash, Barwick-in-Elmet, Great and Little Preston, Kirk Fenton, Lead, Ledston, Little Fenton, Lotherton, Micklefield, Parlington, Saxton, Sherburn-in-Elmet, South Milford, Sturton Grange, and Swillington.

The water is very soft and extremely suitable for domestic use. It is filtered and chlorinated by the Leeds Corporation.

Two samples of this water were examined for plumbosolvency but both were negative.

### **Tadcaster Public Supply**

This water is obtained from a deep bore-hole and deep well at Bilbrough, the following parishes being supplied from this source:—

Bilbrough, Catterton, East Tadcaster, Grimston, Healaugh, Kirkby Wharfe, Newton Kyme, Oxton, Ryther, Steeton, Stutton, Towton, Ulleskelf, and West Tadcaster.

In its raw state the water is rather hard (22-24 deg.), but is treated by a softening plant to give a figure of hardness of 6 to 8 degrees. In addition to softening, this water is chlorinated.

During the year 14 samples were submitted for bacteriological examination, 13 of them being satisfactory and one unsatisfactory. This unsatisfactory sample was found to be due to the chlorinator being temporarily out of action.

### **York Waterworks Company**

This water is derived from the river Ouse at Clifton, York, and is purchased in bulk by the Council. It is distributed to the following parishes:—

Acaster Malbis, Acaster Selby, Appleton Roebuck, Askham Bryan, Bolton Percy, Colton, and Copmanthorpe. The parish of Bishopthorpe is supplied direct by the Company.

It is possible, however, for the above parishes with the exception of Bishopthorpe and Acaster Malbis to be supplied

from the Council's own supply at Bilbrough.

The water is filtered and chlorinated by the York Water-works Company.

### **Other Public Supplies**

In the parish of Ledsham, 28 houses in the village of Newton are supplied with water from Pontefract.

The 9in. Main laid during the war by the Air Ministry from the Selby U.D.C. supply at Brayton Barff, to augment supplies at Sherburn and Church Fenton Aerodromes, has now been taken over by the Council.

The new storage reservoir at Hook Moor was completed during August, and this work has considerably improved the water supply in Micklefield and the higher portions of Sherburn.

## **PRIVATE SUPPLIES**

### **Askham Richard**

This village and H.M. Prison are supplied with water derived from a bore-hole on the eastern side of the village. During the year six samples were submitted for bacteriological examination and all were found to be satisfactory.

The supply is under the control of the Ministry of Works and is chlorinated.

During the year negotiations began between the Ministry and the Council for the Council to take over the supply, and it was expected that the change-over would take place early in 1955.

### **Ledsham**

This village is supplied with water derived from springs in the magnesian limestone to the north of the village. Nine samples were submitted for bacteriological examination, two being satisfactory and seven unsatisfactory, the villagers being advised to boil the water before drinking.

During the year the new public mains were laid into the village, but the Council's supply was not available at the end of the year.

### **Ledston**

This village is supplied with water from springs in the limestone to the north village, as is also the private school. Acute shortage in the village supply was experienced, and water had to be delivered by the fire service vehicles, which discharged the water into the school supply storage tank, from whence it was pumped back into the village supply tank.

During the year (December) the village was supplied with

mains water from the Leeds supply at Ledston Luck, and negotiations were begun with the school authorities for them to take a new supply direct from the mains. Six samples from the school were submitted for bacteriological examination and all were satisfactory, this supply being chlorinated. Four samples were taken from the village supply, two being satisfactory and two unsatisfactory.

### **South Milford**

The British Transport Commission supply a number of their properties at Milford Junction with water from a bore-hole near the line side. This supply has been satisfactory both in quantity and quality.

## **REFUSE COLLECTION AND DISPOSAL**

### **Organization**

At the present time the district is divided into seven areas, each being served by a vehicle and a team of men. The areas are:—

Ainsty: Dennis 7 cu. yd. vehicle and three men.

Tadcaster (plus Bishopthorpe and Church Fenton): S. & D. 18 cu. yd. Fore and Aft Tipper, with four men. This vehicle is engaged solely on the emptying of dust bins.

Barwick: Dennis 7 cu. yd. vehicle and three men.

Aberford and Micklefield: Dennis 7 cu. yd. vehicle and three men.

Sherburn and South Milford: Dennis 10 cu. yd. vehicle and three men.

Great Preston and Swillington: Dennis 7 cu. yd. vehicle and three men, plus one man for one day to wheel dust bins out.

Church Fenton: Fordson 7 cu. yd. vehicle and three men.

In addition to the usual service for domestic premises refuse is collected from Church Fenton Aerodrome.

### **Collection Period**

The period of collection varies according to the type of the district, but for dust bins it is generally from seven to fourteen days. In the colliery districts the dust bins are emptied every seven days.

Pail closets are emptied weekly wherever possible, and ash pits from four to eight weeks, depending on the location and size.

Difficulties in maintaining the collection period are encountered at times due to holidays and absence due to sickness and accidents.

## **Labour**

A full labour force was maintained for most of the year but in one area two men had to be dismissed for refusal to carry out reasonable instructions regarding their work. Your Council have adopted in full the Wages and Service conditions of the Joint Industrial Council. The total number of men employed is 23.

## **Disposal**

Refuse is disposed of by tipping at various tips throughout the area. A small amount of night soil is tipped on agricultural land. The tips are situated at Aberford, Barwick, East Tadcaster, Great Preston, Micklefield, Sherburn, Swillington, and Towton, the tips being generally in a fair condition.

## **Salvage of Waste Paper**

During the year 32 Tons 2 $\frac{1}{4}$  Cwts. of waste paper were sold, the value being £211 4s. 7d. The price of waste paper is still rather low.

# **FOOD ADMINISTRATION**

## **Meat Inspection**

### **Sherburn Bacon Factory**

During the year your Sanitary Inspectors made 564 visits to the Factory for the purpose of Meat Inspection, and 227 $\frac{3}{4}$  hours of overtime were worked.

The following is a summary of the number of pigs killed together with the amount of meat condemned:—

Total number of pigs killed	...	147,564
Condemned	...	172 Whole Carcasses
		162 Part Carcasses
		4,373 Guts
		6,722 Heads
		10,373 Plucks

### **Private Slaughter Houses**

In July the de-rationing of meat took place and the Minister of Food requested Local Authorities to make the necessary provision to enable the meat traders to produce home-killed meat. As a result of this, 10 Private Slaughter-houses were re-licensed and arrangements made for the inspection of meat.

Altogether 489 visits were made to slaughterhouses for meat inspection, and in the period 78 $\frac{1}{2}$  hours of overtime were worked. The following is a summary of the number of animals

killed, together with estimated weight of meat condemned:—

287 Bullocks.

102 Heifers.

4 Cows.

Estimated weight condemned: 11 Cwts.

634 Calves.

806 Sheep.

241 Pigs.

## General

Six emergency slaughters were notified and the carcases and organs of three pigs, one calf, one sheep, and one cow were inspected, The carcases and organs of the calf and one pig were condemned, the others being passed as fit for food.

10 visits were made to inspect various unsound foods, and the following were condemned:—

90 lbs. Tinned Ham.

172 Tins Miscellaneous Food.

4 Turkeys.

A total of 74 visits were made to food preparing premises, bakehouses, butcher's shops, fried fish premises, etc., the general standard of cleanliness being good.

## Ice Cream

43 Premises were registered at the end of the year, four of these being producer-retailers. 11 visits were made to ice cream premises. Almost all the ice cream sold in the district is now pre-packed.

## GENERAL SANITATION

### Abatement of Nuisances, etc.

During the year 5 Statutory and 47 Informal Notices were served, requiring the abatement of nuisances, etc. Altogether 36 were abated, these being roof repairs; the remedying of dampness; repairs to floors, gutters, fall pipes, windows, fire-places, closets, etc., and the cleansing of blocked drains.

### Disinfection, etc.

Three houses were disinfected, following cases of infectious disease, and forty visits were made to premises regarding vermin disinfestation.

### Factories' Act

Twelve visits and inspections were made in respect of the above and the general standard of cleanliness was good.

## **Rodent Control**

During the year the Council's Rodent Operative made 516 visits for the purpose of rodent control to Council properties (refuse tips, sewerage systems, sewage disposal works), private properties, and farms, etc. He was called upon for a substantial part of the year to help in maintaining the refuse collection service. This was due to the illness and accidents amongst the men.

## **Cesspool Emptying**

The requests for this service continue to increase, and it is generally appreciated by many occupiers of premises which are not served by any system of sewers. A charge is made for the service, the charge being based on the rateable value of the property.









